0 2 2001 Utber the Paperwork Reduction	Act of 1995 no person:	s are required to	U.S. Pa	tent and Tradem	nark Office; U.S. DE	PTO/SB/17 (* 07/31/2006. OMB 0651 PARTMENT OF COMMI s a valid OMB control no	-0032 ERCE
			 	Complete if Known			
Fees Pirsuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application	Application Number		,921	
FEE TRANSMITTAL		Filing Date			September 20, 2000		
For FY 2005			First Named	d Inventor	James	M. Barton, et al.	
			Examiner N	lame	Jamie .	J. Vent	_
Applicant claims small entity status. See 37 CFR 1.27		Art Unit		8519			
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Attorney Docket Number		60097-	60097-0112		
METHOD OF PAYMENT (chec	k all that apply)						
Check Credit Card Deposit Account Deposit Acc For the above-identified deposit Charge fee(s) indica Charge any addition under 37 CFR 1.16 WARNING: Information on this form n information and authorization on PTO	ted below al fee(s) or underpay and 1.17 nay become public. Cr	or is hereby aut	Deposit And thorized to: (che Charge fe	eck all that app e(s) indicated y overpayment	ickman Palermo lly) below, except fo	-	
FEE CALCULATION	-2030.						
1. BASIC FILING, SEARCH, A FILIN Application Type Utility 300 Design 200	G FEES Small Entity Fee (\$) 150	SEARCH Fee (\$) 500 100	FEES Small Entity Fee (\$) 250 50	EXAMINA Fee (\$) 200 130	ATION FEES Small Entity Fee (\$) 100 65	Fees Paid (\$)	_
Plant 200	100	300	150	160	80		-
Reissue 300		500	250	600	300		_
Provisional 200 1'00 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims Extra Claims Fee (\$) Fee Paid (\$) 42 -81 or HP = x = 0.00 Multiple Dependent Claims HP = highest number of total claims paid for, if greater than 20. Fee (\$) Fee (\$) Fee Paid (\$)							
Indep. Claims 3 - 9or HP = HP = highest number of independent of 3. APPLICATION SIZE FEE If the specification and drawir listings under 37 CFR 1.52 sheets or fraction thereof. S Total Sheets	x aims paid for, if greater aims paid for, if greater aims exceed 100 she (e)), the application application are 35 U.S.C. 41(ats Number of 50 =/50 =/50	eets of paper on size fee du a)(1)(G) and i of each additio (rou	(excluding elements \$250 (\$12) (\$12) (\$12) (\$12) (\$12) (\$13) (\$13) (\$14) (\$15)	25 for small on spirit	entity) for each Fee (\$)		
Non-English Specification, Other (e.g., late filing surch		II entity disc	ount)				_

SUBMITTED BY			
Signature	111	Registration No. 43,284 (Attorney/Agent)	Telephone 408-414-1214
Name (Print/Type)	Kirk D. World		Date January <u>30</u> , 2007

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Firm Name

Signature Printed name

Date

1FW 9621.

PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
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Under the Paperwork Reduction Act of 1995, no	Application Number	09/665,921		it displays a valid Civib Condo Humber.	
TRANSMITTAL	Filing Date	September 20, 2000			
FORM	First Named Inventor	James Barton, et al.			
1 Oldivi	Art Unit	2621			
(to be used for all correspondence after initial filing)	Examiner Name	Jamie J. Vent			
Total Number of Pages in This Submission 18	Attorney Docket Number	60097-0112			
	ENCLOSURES (Check	all that apply			
	ENCLOSURES (Check	an that apply)	_	After Allowance Communication	
Fee Transmittal Form	Drawing(s)			to TC	
Fee Attached	Licensing-related	Papers		Appeal Communication to Board of Appeals and Interferences	
Amendment/Reply	Petition Petition	4 40 0		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
After Final	Petition to Convert to a Provisional Application			Proprietary Information	
Affidavits/declaration(s)	Power of Attorney	, Revocation		Status Letter	
Extension of Time Request	Change of Corres	pondence Address		Other Enclosure(s) (please Identify below): Response to Notice of Non-	
Express Abandonment Request	Terminal Disclaim	er		Compliant Amendment; • Return receipt postcard	
Information Disclosure Statement	Request for Refur				
Certified Copy of Priority Document(s)		Table on CD			
Reply to Missing Parts/	Remarks				
Incomplete Application	The Director is hereby authorized to charge any additional fee(s) or underpayments of				
Reply to Missing Parts under 37 CFR 1.52 or 1.53	fee(s) under 37 CFR 1.16 and 1.17 to Deposit Account Number 50-1302 Deposit Account Name: Hickman Palermo Truong & Becker LLP				
SIGNATU	IRE OF APPLICANT, A	TORNEY, OR AG	GENT		

CERTIFICATE OF TRAN	ISMISSION/MAILING
I hereby certify that this correspondence is being facsimile transmitted to sufficient postage as first class mail in an envelope addressed to: Mail Str Alexandria, VA 22313-1450 on the date shown below:	
Signature / MMHLL April	
Typed or printed name Annette Jacobs	Date January <u>30</u> , 2007

Reg. No.

43,284

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Kirk D. Wong, 1

Hickman Palermo Truong & Becker LLP

Docket No.: 60097-0112

HE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Confirmation Number: 8519

James Barton, et al.

Group Art Unit: 2621

Serial No.: 09/665,921

Examiner: Jamie J. Vent

Filed: September 20, 2000

Customer No. 29989

For:

CLOSED CAPTION TAGGING

SYSTEM

Mail Stop Amendment Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

RESPONSE PURSUANT TO 37 C.F.R. § 1.111

Sir:

In response to the Notice of Non-Compliant Amendment dated January 18, 2007, the statute period which runs until February 18, 2007, which complies with 37. C.F.R. 1.121.

There are no amendments to the specification. Amendments to the claims, and Remarks, are presented on separate sheets below.

P022 1